

CLAIMS ONLY								Application Number 16 649 801		Filing Date			
								Applicant(s)					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend	51	Indep	Depend	Indep	Depend		
1							52						
2							53						
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43							94						
44							95						
45							96						
46							97						
47							98						
48							99						
49							100						
50							Total						
Total	Indep	2					Total						
Total	Depend	3					Total						
Total	Claims	3					Total						